THE UNIVERSITY OF CAPE COAST

THE EFFECTS OF WORKING CONDITIONS ON THE HEALTH OF THE STAFF OF GHANA COMMERCIAL BANK LIMITED IN ASHANTI ZONE

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2016

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BY

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Dissertation submitted to the Institute for Development Studies of the Faculty of Social Sciences, College of Humanities and Legal Studies, University of Cape Coast, in partial fulfillment of the requirement for the award of Master of Arts Degree in Human Resource Management

MAY 2016

DECLARATION

Candidate's Declaration

I hereby declare that this thesis is the result of my own original
research and that no part of it has been presented for another degree in the
university or elsewhere.
Candidate's Signature
Name:
Supervisor's Declaration
We hereby declare that the preparation and presentation of the thesis
were supervised in accordance with the guidelines on supervision of thesis
laid down by the University of Cape Coast.
Supervisor's Signature Date

ABSTRACT

The working conditions of the Ghana Commercial Bank Limited (GCB Ltd) has been regarded by its members of staff as unfavorable, as it has had negative repercussions on their health. By virtue of this problem, this study sought to ascertain the effect of the conditions of work on the health of the bank's staff members in Kumasi Zone. Specifically, the research examined the elements that motivated workers to render their services with the bank, the nature of their conditions of work and the health problems that besotted them as a result of their working conditions.

One hundred and fifteen (115) respondents were selected from a population of one hundred and twenty (120) respondents. The stratified sampling method was adopted to classify the respondents into seven categories to reflect their job descriptions. The simple random sampling technique was then employed to select the embarked 115 respondents. The descriptive survey was adopted as the research design, while questionnaire was used as the instrument for data collection to elicit primary data. Tables, pie charts and bar graphs were employed as the methods for data analysis.

Finding from the study depicted that most workers bemoaned their late closure from work on a daily basis, which was obligatory. They saw this aspect of their job as undesirable, as it eventually caused stress, high blood pressure, obesity and other illnesses in their lives, as a remedy to the said problems, early closure from work and the enforcement of the division of labour in the bank were suggested mechanisms to pre-empt stress and its associated diseases.

ACKNOWLEDGEMENTS

My heartfelt gratitude goes to Mrs. Mary Mireku for her love, support, cooperation and consistent encouragement to undertake and pursue this programme to the end. I am most grateful to my supervisor, Dr. Frederick Koomson, for his selfless devotion in offering very useful criticisms and contributions to make the writing of this thesis possible. I cannot forget the senior members of the Institute for Development Studies for their guidance and suggestions that helped me to shape the outcome of this thesis. I am particularly indebted to Mr. AkonnorTakyi of the department of Sociology at the University of Cape Coast, for equally encouraging me to offer this programme.

I wish to use this opportunity to express my sincere gratitude to Mr. Michael Atta Buady, my retail Manager of SefwiWiaso branch of GCB Ltd, for his advice, support and encouragement to study as far as my strength can take me to. My special thanks goes to Ms. Stella Ntoko of the Institute for criticisms, development Studies, for her important suggestions, encouragement and assiduity that helped to refine and make this work a success. My gratitude also goes to all my course and study mates for their moral supports while on campus. Though I have acknowledged the support of various people in the completion of this dissertation, I accept full responsibility for any shortcomings.

DEDICATION

To my wife, Mary Mireku (Mrs.) and my children, Kwame Brobbey, Afia NhyiraMireku, AdwoaAsedaMireku and KwakuNkunimMireku.

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LIST OF ACRONYMS

CBA Collective Bargaining Agreement

CV Compute Variable

EC European Commission

EFIWLC European Foundation for the Improvement of Working

and Living Conditions

EUOSHA European Agency for Occupational Safety and Health

at Work

EU European Union

EWCS European Working Conditions Survey

GCB Ltd Ghana Commercial Bank Limited

HSE Health and Safety Executive

ILO International Labour Organization

OECD Organization for Economic Co-operation Development

OSHS Occupational Safety and Health Service

RNG Random Number Generators

SL Saskatchewan Labour

SPSS Statistical Product and Service Solutions

TPD Transform Pull Down

WS BC Work Safe BC

CHAPTER ONE

INTRODUCTION

Background to the study

Engaging in an economic activity is sacrosanct for the sustenance and development of human life. Nonetheless it is imperative for an enabling environment to be created for people to operate effectively without compromising their health. Thus, the managers of such an environment are to seek to protect and promote the physical and mental health of their subordinates, as well as seek to create condition that will enable them to apportion time for extracurricular activities. In recent times, the European Commission- EC (2010a) note that organizations worldwide are beginning to attach premium to the working conditions of their employees, in other to ensure a high level of protection of workers' health, their safety in terms of working time and to strike a balance between their work and private life.

Additionally, the EC (2010b) reiterates that health and safety has become a core competence of the European Union and European Social Policy. Article 153 (1 and 2) of the treaty of the functioning of the European Union (EU) further authorizes the European Council to adopt by means of EU directives, minimum requirements with regards to the improvements of the working environment to protect workers' health and safety. Due to the stipulated condition, directive 89/391/EEC places an explicit responsibility on the employer to adapt the working environment to the individual, especially with regards to the design of work places, the choice of work equipment, working and production methods (EC, 2010b).

The European agency for Occupational Safety and Health at work EUOSHA (2007) states that psycho-social risks, which are linked to the modality by which work is designed, organized and managed, as well as the economic and social contest of work, can culminate in an increased level of stress and serious deterioration of employees' mental and physical health. Armstrong (2007) observes further that the health and safety executive (HSE) in Britain estimated that about 500 people are killed and several hundreds of thousands are injured or suffer ill-health at work every year. Furthermore, the HSE estimates that apart from the pain and misery caused to those who are indirectly or directly concerned, the total cost to British employers of work related injury and illness exceeds four billion pounds a year. The interface between work and health condition is further expounded by Debrand (2007) and Debrand and Lengage (2008) in the job quality, demand-control and effort-rewards imbalance models of working conditions.

Despite, the debilitating effects of deplorable working conditions on employees' health, Madlock (2008) in the theories of motivation, however emphasized that people are always not hesitant to work and continue working owing to extrinsic and intrinsic factors such as salary, remuneration, personal growth and responsibility. Carraher, Buchanan and Puia (2010) postulates that the desire for three human basic needs such as the need for achievement, affiliation and power are crucial factors that can also motivate people to work. The desire to get rewarded, self-efficiency and goal setting are sources of motivation to work that have also been identified by Hopp (2004) and Johnson and Lewis (2010).

As a mechanism to foster a conducive working environment for employees in the Ghanaian contest, Obeng-Fosu (2007) states that the health and safety at work Acts of 1974, as well as section 120 of the Ghana Labour Act of 2003, Acts 651 was enacted to charge employers with the responsibility to report as soon as practicable and not later than seven days, from the date of occurrence to the appropriate Government Agency, occupational accidents and diseases which occur at the work place. These acts are applicable to all occupational institutions in Ghana. They are of peculiar importance to the banking institutions, where Obeng-Fosu (2007) equally observes that employees are consistently overloaded and saddled with responsibilities, which weigh down their health.

Going by Ghana Labour Act of 2003, Act 651(Section 9), an employer shall take all practicable steps to ensure that a worker is free from risk of personal injury or damage to his or her health during and in the course of the worker's employment or while lawfully on the employer's premises. Section 33 stipulates that employers in the public and private sectors in Ghana are supposed to make room for a maximum of eight hours a day or forty hours a week and equally make provisions for recreational breaks on daily basis to enable workers to relax and rest, while working. After eight hours, work must be terminated to pave the way for workers to go home early enough to prepare for the next working day.

Annual leave is equally mandatory for workers in every working institution in Ghana. An employee is entitled to at least fifteen working days paid annual leave, after completion of twelve months of continuous service. If work is not regularly maintained throughout the year, the requirement for continuous

service is met if the worker has worked for at least two hundred (200) days in a particular year (Section 20 of Labour Act, 2003). In accordance with the section 35 of Labour Acts 2003, a worker may not be required to do overtime work unless that undertaking has fixed rate of pay for overtime work. However, the law does not fix the rate of overtime remuneration. Overtime hours are paid at 150% of the normal hourly wage rate. Workers are entitled to two days of rest per week. The weekly rest days are normally Saturdays and Sundays (Article 42). Workers are also entitled to paid festival (Republic and Religious) holidays. Festival holidays are announced by the Government at the start of the calendar year (Section 72).

In the banking sector, workers are mandated to report to work by 7am but are only obliged to attend to the clients from 8:30am to 4:30pm. Contrary to the time prescribed law for workers to terminate their services after 8 hours of work, the banks only release its workers when they have finished their tasks that were assigned for the day. By implication, even after 4:30pm if workers have not completed their earmarked task, they will not be allowed to go home. Moreover, owing to the demand driven nature of the banking job, bankers are not expected to go on break even when they are due as they are always expected to attend to customers. Thus, they work with little or no pause on a daily basis. Furthermore, their phones are always supposed to be switched off, as they are not expected to answer or make calls during working hours. A worker who is caught making or receiving calls during working hours are considered deviant and penalized accordingly (GCB Ltd, 2009).

Bankers in Ghana are also entitled to a Collective Bargaining Agreement (CBA) which gives room for them to negotiate with the

Government for salary and allowance increment after two years. Moreover, demonstrations or strikes as strategies for workers to express their discontent with working conditions are forbidden in the banking sector. Therefore, when workers are aggrieved, their leaders can simply negotiate with the Government and wait for their grievances to be addressed. This is contrary to the public and private servants who can express their indignation via strikes or demonstrations (GCB Ltd, 2010).

Statement of the problem

Basically, in the GCB Ltd-Kumasi, work commences at 7:30am and closes at 8pm. Inevitably, members of staff discharge their functions with the use of the computers throughout the working time. They also serve the public until the last person leaves the hall. This has caused workers to often go home late in the night at a time when they have to hustle and grapple with vehicular traffic (GCB Ltd, 2007).

A report presented by the Eagle Newsletter of GCB Ltd (July Edition, 2008) reveals that about 56 per cent of bankers in the Kumasi zone asserted that their working conditions were incongruous. They complained of working excessively hard and overtime without adequate benefits, considering the time the bank officially releases them to go home on a daily basis. Eventually, they became exhausted when they go home. They disclosed further that on a daily basis, they ate and slept late, which has equally adversely affected their health.

As a clear indication that workers were pruned with ailments, the GCB Annual Report for 2008, 2009 and 2010 depict further that in 2008, 2009 and 2010, the total medical cost for staff members that were incurred by the bank was approximately GHC1,068,877.00, GHC1,178,241.00

andGHC1,269,716.00 respectively for the three years (GCB Ltd, 2008, 2009 & 2010). Thus, in a nutshell, the workers have bemoaned their working conditions as deplorable and also regarded them as a bane of their health. This necessitated an enquiry into the nature of their working conditions and how it has instigated their health discomfort.

Objectives of the study

The primordial objective of the study was to examine the working conditions and health of the staff in the GCB Ltd- Kumasi zone. The specific objectives were to:

- Examine the factors that motivate the members of staff to work in the banking sector
- 2. Ascertain the nature of working condition at GCB Ltd- Kumasi zone.
- 3. Investigate the health problems of workers that are associated with their working conditions.
- 4. Recommend mechanisms to ameliorate the working conditions of workers for the betterment of their state of health

Research questions

- 1. What are factors that will spur the staff members to work in the banking sector?
- 2. What types of working conditions are workers subjected to at GCB Ltd- Kumasi zone?
- 3. What are the ailments plaguing the lives of workers, as a result of their working conditions?

Significance of the study

The study will be of immense benefits to bankers in all the banking institutions of Ghana in creating health awareness among them to take precautions in the pre-empting long-term ailments. Results from the study can also be used by management of the GCB to restructure and review its policies on the working condition of workers that will make the working environment much more conducive for them. The research shall also act as an eye opener to other organizations to reform the ailing working conditions of its employers and institute a congruous health policy for them when they become ill. The study also stands to complement the body of academic knowledge on working conditions and health in organizations, most especially banking organizations.

Organization of the study

The research is organized into five chapters. The first chapter examines the background of the study, statement of the problem, objectives of the study, research questions, significance and organization of the study. Chapter two review relevant literature on the theories, models, concepts and empirical studies related to the study. The third chapter tackle the methodological aspects of the study. This chapter is an embodiment of the study design and organization, population, sampling procedures and sample size, instrumentation. The source of data, pretext and data collection exercise and methods for data analysis are also covered in this chapter. The fourth chapter elaborates on the results and the discussion of the research. Chapter five summarizes, concludes and make recommendations for the research.

CHAPTER TWO

REVIEW OF RELEVANT LITERATURE

Chapter two reviews and harmonizes relevant theoretical and empirical works that underpin the study. It is partitioned into three sections namely: the theoretical literature, empirical review and conceptual framework. The review guides the formulation of the instrument for data collection (the questionnaire) and is used to discuss the findings of the study.

Theoretical literature

This component of the literature expounds on the motivation theories (motivation, equity, systematic expectancy theory of workplace motivation, equity and goal setting), concept of working conditions in totality and the models underscoring the nature of working conditions. The relationship between working conditions and health are also covered in this section.

Motivation theories

Hajjawi (2012) broadly defines motivation as a set of forces that cause people to behave in certain ways and part of managerial directing functions. The theories of motivation this section seeks to address consist of the motivation theory, equity theory, systematic expectancy theory of workplace motivation and the goal setting theory of motivation. Going by the motivation theory, individuals strive to seek higher needs when lower needs have been fulfilled. If a lower need is satisfied, it will no longer serve as a source of motivation. Once the basic physical and safety needs are sorted out, human beings can feel more ready to share themselves with others and accomplish other things in the world. Once individuals come to feel satisfied with their

accomplishments and sense of social worth, they take another step, which is self-actualization (Hajjawi, 2012).

Strokes (2004) suggests that job satisfaction and dissatisfaction depend on two kinds of factors that affect motivation. These factors are extrinsic hygiene and intrinsic motivation factors. Extrinsic hygiene factors create dissatisfaction when employees perceive them as inadequate or inequitable, yet they will not be significantly motivated if these factors are perceived as inadequate or good. Such factors include salary, remuneration, job security and work conditions. Koltko-Rivera (2006) on the hand posits that intrinsic motivation factors, which are of higher order than extrinsic factors consist of a sense of achievement, recognition, responsibility and personal growth. Carraher et al (2010) identifies three basic needs namely, needs of achievement, affiliation and power.

Needs of achievement refers to a situation where an employee who has a high need for achievement tries to attain challenging goals and takes personal responsibility as a need for a high sense of accomplishment. Where an employee has the need for harmonious relationships or is employee-oriented, rather than task-oriented, such a need is termed a need for affiliation. Need for power refers to the expressed desire by an employee to direct and command others (Carraher et al 2010).

The equity theory of motivation extends beyond the simpler theories of Maslow and Alderfer by postulating that when employees feel fairly or advantageously treated, they are more likely to be motivated compared to when they feel unfairly treated, they are highly prone to feelings of disaffection or demotivation. The sense of fairness commonly underpins

motivation that is not determined by pay and conditions alone. It is rather dependent on comparison between the input-to-output ratio and ratio of others (Hopp 2004). In line with the motivation theory, Madlock (2008) developed the expectancy theory of workplace motivation, which states that employees are motivated to work towards rewards that they want and believe they have responsible expectancy of obtaining. Thus, a reward they may seem of reach, even if they are intrinsically positive they will not motivate employees to give in their best.

Johnson and Lewis (2010) proposes the goal-setting theory of motivation that is essentially linked to task performance. The theory states that specific and challenging goals could contribute to higher and better task performance. The writer reiterates that the goal setting has certain eventualities such as self-efficiency and goal setting. Self-efficiency is employee's self-confidence and faith that he or she has the potential of performing the task. The level of self-efficiency is directly proportional with the effort put in by the employee who is facing challenging tasks. Goal setting on the other hand assumes that the employee is committed to the goal and will not abandon the goal (Johnson and Lewis 2010).

Working conditions

Simeon and Hurst (2006) argue that there is no universally agreed definition of working conditions because it means different things to different people. Nonetheless, the writers postulate that the aspects of working conditions that are frequently referred to in the literature includes the terms of employment (types of contracts), income (payments and benefits), working time, safety and health at the work, professional development (education and

training) and work organization (staff and division). In view of these components, Simeon and Hurst (2006) working conditions are conditions and surrounding influences in which people execute an activity.

Kokalov (2006) states that the purposes of instituting working conditions in a work environment is to guide the operations of employees that will enable them to conform to the rules, regulations and standards of the environment. Peus (2006) observes that working conditions can either be favorable or unfavorable. Favorable working conditions connotes that the conditions are palatable, while unfavorable working conditions suggest that they are not the least palatable to employees. Gunnarsdottir and Rafferty (2006) suggest that two ways by which the work environment or conditions of professions can be improved include formatting and implementing policy approaches to foster a higher balance between family life and work and the enhancement of the protection of employees' health.

The purpose of providing attractive work environment or conditions is to establish incentives for entering a profession (recruitment) and remaining in a work force (retention). Supportive work environments also provide conditions that enable employees to work effectively, making the best use of their knowledge, skill and competences and the available resources to provide high quality services (Hansen, Sverke&Naswall, 2009). As a strategy to encourage employers to make a commitment to positive work environments, the writers recommend that the development of a workplace assessment, recognition and prevention programme should be considered.

Going by Buchan's (2008)observations, improving the work environment requires measure that are relevant and applicable in the specific

context of a given apparatus, while observing international standards and considering relevant regional harmonization efforts. Policy responses, Buchan suggest, should therefore be considered at the international or regional levels, to ensure policy coherence and enhance the sustainability of interventions. The writer notes further that policies and instruments intended to improve the work environment are available in the form of standards, legislation, resolutions and framework agreements.

Voss (2009) reiterates that international standards in conjunctionwith regional and nation legislation are instruments for enforcing the application of set standards in quality health care and for safeguarding workers' rights. However, Munov and Bustillo(2009) opines that standards and legislation in themselves do not suffice to address the challenges of attracting and retainingprofessionals associated with a work environment. With regards to occupational health and safety for instance, the EC (2010) observes shortcomings in the application of community legislation, especially in sectors of risk and for vulnerable workers. Thus, as many instrument in the international and national levels are general in their scope, the rule of the sectorial level is to identify relevant standards and policies and adapt to the specificities of the work environment.

In view of the pace of the socio-economic and technological changes and their considerable impact on employment and working conditions, the World Health Organization (2009) cautions that policy responses need to reflect emerging challenges on a continuous basis. The writer admonishes that effective solutions are text-based and so priority has to be given to the local and organizational levels. The other levels provide the legislative and

regulatory framework, guidance and support for the development of work place policies. The organizational level is concerned with monitoring trends and providing feedbacks on emerging new challenges that require action at the other levels.

Models of working conditions

Researchers have formulated models that elaborate and make propositions as to how congruous conditions of work are to be structured. Some of these models are the quality of job, demand-control and effort – reward imbalance models. The job quality model is measured from two dimensions which are the work and the employment qualities. The work quality is the material characteristics of the task performed and the environment within which it is performed. It encompasses elements such as work autonomy, work organization(including division of work and staffing), Conversely, the employment quality refers to the contractual relationship between the employer and the employee. It embodies aspects like wages, type of contract, working hours (work schedules and family- work balance), social benefits, participation, professional development (training and skill development) (Hasselhorn, Muller & Tackenberg, 2005)

The model of imbalance between demand and control and the model of imbalance between demand and reward provide a framework for analyzing the effects of psychological stress at work on the health status of workers. They involve three dimensions namely: demand, control and reward. Demand reflect physical demand and pressure due to heavy workload while control refers to latitude decisions and possibilities to develop new skills. Reward on the contrary corresponds to the feeling of the receiving correct salary

relatively to the effort made, of having prospects for personal progress and receiving deserved recognition(Debrand&Lengagne,2008)

The demand and control imbalance model propounds that workplace organization determines some of the psycho-social characteristics of work, which themselves have an influence on the health of workers. Furthermore, a low level of control combined with a strong demand represent a risk for health. Thus, the health employees can simply be affected by virtue of the work organization and not by the individual characteristics(Blanchet&Debrand, 2005; Debrand, 2007; Debrand&Lengagne,2008)

Siegrist's model of demand and reward imbalance on other hand, takes into account some work characteristics such as having a demanding job or not and workload this more or less heavy. The model also takes into cognizance individual characteristics relating to the level of involvement of a worker, as well as monetary and non-monetary rewards that he or she receives such as recognition, progress and satisfaction (Siegrist, Knesebeck & Wahrendorf, 2005). The main idea of this model, Debrand and Lengagne (2008) propounds, is that an imbalance between demand and reward exposes workers to high psychological stress, culminating in the long term to the appearance of pathologies such as cardiovascular disease, mental or physical health problems.

These two models of imbalance also consider that the risks of deterioration of health increase when these situation of imbalance are combined with the absence of support at work or a feeling of job insecurity (Dewey & Prince, 2005). The writers remind that adequate support at work

can play on health by losing control of the situation and having a direct effect on demand. They add in particular that workers who receives support at work are enabled to face up to a structural change such as the merging of two companies. In addition, Faragher, Cass, and Cooper(2005) argue that job insecurity is today considered an important source of stress. This is particularly true for the category of older workers for whom the possibility of finding another job, if they lose their job is low.

The relationship between working conditions and health

The interface between the conditions of work and the health employees is interwoven. Deplorable working conditions cannot guarantee good health. Conversely, the poor well-being of workers cannot spur them to put in their best for the growth and development of their organizations. The work environment constitutes an important factor in the recruitment and retention of professionals and the characteristics of the work environment also affect the quality of health care directly and indirectly. Addressing the work environment therefore, plays a critical role in ensuring the supply of a health workforce and the enhancement, effectiveness and motivation of the entire work polity of an organization (World Health Organization, 2006).

Wozowczyk and Massarelli(2011) maintain that workers' health is affected by their work and non-work activities, which in turns are to some extent influenced by the broader political and economic context. Redistributive mechanisms such as the extent of health insurance coverage, as well as the existing care infrastructure or the introduction of prevention programs have an impact on health outcomes and mediate the impact of social determinants of health.

Bambra(2011)explains the exposure to risk may have a direct impact on health. For example, exposure to high levels of noise may lead to long-term hearing problems. This is also true for work related stress, which may have direct effects on health through biological, as well as psychological pathways. The writer adds that some negative effects of work on health may or may not be reversible and may therefore affect the capacity of the people to engage in paid work in the future and thus impact on their quality of life and work.

Parent-Thirion, Vermeylen, Lyly- Yrjanainen, Houten, Biletta and MacGoris(2012) assert that people work for more than 48 hours a week report more problems in terms of work life balance and healthmore problems in terms of work life balance and health than those who do not. They are also four times less likely to report that they have a good work-life balance. Besides health problems associated with long working hours, people who work 48 hours or more are more exposed to work intensity, think more often that their health and safety is at risk. Moreover, by virtue of their work, they think less that they might be able to do the job until they are 60 (Parent-Thirion et al., 2012).

Epidemiologists and economists have proposed different hypotheses by which working conditions may affect individual health. On the one hand, different attributes of the job, which may be tangible (strength of manual work),psychological (stress, discrimination, conflicts at work), and contractual(fix-term job, job insecurity)are considered having a negative impact on psychological wellbeing and mental health(Bockermann&llmakunnas, 2007).Moreover, Blanchflower and Oswald

(2008)opine that job attributes are likely to affect jointly, rather than independent, health outcomes in such a way that they may complement each other.

However, the extent to which these features affect individual wellbeing, also depends on whether they are part of a contract and where pay is for unfavorable working used to compensate conditions (Blanchflower&Oswald,2008). In Bassaniniand other words, Duval(2009)canvasses that it is not a job with demanding working conditions per se that determines adverse effects on health and psychological well-being, rather it is the imbalance between job conditions and reward structure which is assumed to be the driving factor.

Evidence from epidemiological studies provides support for the adverse health effects of job characteristics such as psychological workload, stress and control over work (Godin & Kittle, 2004). Another strand of research in psychology has focused on the health effects of new employment patterns such as outscoring and fixed –term employment and found support for the hypothesis that job insecurity has adverse effects on psychological well-being (Lindeboom& Van Doorslaer, 2004). Lena-Nozal, Lindeboom& Portrait(2004) also notes that empirical evidence has typically found that atypical employment which includes temporary and part-time employment schemes do not appear to be associated with adverse health consequence for men and women.

Nonetheless, Sousa-Poza and Sousa-Poza (2007) rather found that unemployment individuals suffer marked rise in anxiety, depression, loss of confidence reduction in self-esteem and lower level of happiness compared to

individuals low paid employment .Specifically, the Organization for Economic Cooperative and Development –OECD(2008) stresses that difficult working conditions that are detrimental to health reduce the productivity of old workers, increase their absenteeism rate, the probability of them losing their jobs and incite them to leave the employment market as soon as possible. Thus, preserving the health of older workers in the workplace to keep them working as long as possible may be one key to success of current policies aimed at preserving social security systems (OECD, 2008).

Jobs with tight working conditions such as high demand, low control and inter-personal support have been found to be significant associated health conditions at work (Datta Gupta&Kristensen, 2007). Moreover, being unsatisfied with contractual and working conditions also has a negative influence on health of individuals. Comparatively, a favorable work environment is conducive to better health conditions even after controlling for unobserved heterogeneity. Additionally, inactive individual who obtain a non-standard job benefit less, in terms of health and psychological well-being than those moving into standard employment arrangements (Datta Gupta &Kristensen, 2007; Parent-Thirion, Macias, Hurley &Vermeulen, (2007).

Groene (2006) propounds that the purpose of providing an attractive and supportive work environment is to create incentives for entering and remaining in a service and to provide conditions that enable workers to perform effectively. The European Foundation for the Improvement of Working and Living conditions-EFIWLC(2007) postulates that owing to the nature of work particularly in the banking service sector, workers are exposed to psychosocial risks one of which is stress. Going by the

EUOSHA(2009)stress that emanates from work is experienced when the demands of the work environment exceed workers' ability to cope with them.

Ongoing or intense stress that emanate from work can result in symptoms such as chronic fatigue, burn-out, depression, insomnia, anxiety, headaches, emotional upsets, stomach ulcer and allergies. Furthermore, work related stress is also associated with cardiovascular and musculoskeletal diseases and immunological problems (EUOSHA, 2009). The International Labour Organization-ILO(2010) notes that the job characteristics that contribute to ill health are mostly related to the way in which the work is organized. These characteristics are long hours of and irregular work, high workloads, tight time constraints, insufficient control and job insecurity.

Obeng – Fosu (2007)states that artificial temperature is often infused inmost banking premises in Ghana. Air conditioners are often installed in the office of bankers to minimize the heat that is generated by the glass windows. The conditioners are left throughout the working day and causes the environment to be excessively cold, which becomes a potential source of health discomfort to bankers.

The Saskatchewan Labour-SL(2012) observes that health problems associated with cold exposure in a working environment are frostnip, frostbite, hypothermia, childblains, immersion foot and trenchfoot. Frostnip is the mildest form of a freezing cold injury. It occurs when ear lobes,noses, cheeks, fingers or toes are exposed to cold and the top layers of the skin feels hard but the deeper tissue feels normal. The top layer of the skin sometimes peels off the affected area (WorkSafeBC-WSBC,2012).

Frostbite on the hand is caused by exposure to extreme cold or by contact with extremely cold objects. It occurs when tissue temperature falls below freezing or when blood flow is obstructed under cold conditions. Blood vessels may be severely and permanently damaged and blood circulation may stop in the affected tissue. Hypothermia occurs when the body is unable to compensate for the heat loss and the body's core temperature starts to fall. An individual will feel cold followed by pain in exposed parts of the body. As the body's core temperature continues to drop, the feeling of cold and pain starts to diminish because of increasingly numbness (loss of sensation). If no pain is no longer felt, serious injury can occur without the victim noticing it. As the body continues to cool, muscular weakness, an inability to think clearly and drowsiness are experienced (Occupational Safety and Health Service-OSHS, 2012).

Trenchfoot on the contrary is wet cold diseases resulting from prolonged exposure in a damp or wet environment from the freezing point to 10 C (Saskatchewan Labour, 2012).WSBC(2012)reiterates further that cold can also have mental and physical effects on workers' health. The mental changes that ensue from a continuous exposure to cold are loss of alertness, slurred speech, fatigue,lethargy or apathy. The physical responses include a loss of sensitivity and dexterity in fingers, hands, and toes. At lower temperatures, deep muscle can be affected, reducing muscle strength and flexibility.

However, Liu(2008) suggest that to rectify the repercussions of poor working conditions on workers' health, an injury and illness prevention program can be mounted in organizations. The writer postulates that such a

program is effective in overhauling work place culture, which can curtail injuries, illnesses and fatalities, reduce workers' compensation and other costs as well as enhance their morale and communication. Nonetheless, Huang (2009) emphasizes further that injuries and illness prevention program should comprise of pertinent characteristics such as management's commitment and leadership, effective employee participation, the integration of health and safety with business planning and continues program evaluation. The writer notes that without incorporating these elements, an injury and illness prevention programme shall be least effective.

For many small organizations, establish an injury and illness prevention program may seem daunting. This is by virtue of its requirements for formal structure that can be difficult to establish in small organization because of tight budgets (Hasle&Limborg, 2006). Angello (2010) on the hand counteract that yet simple low cost approaches of injury and illness prevention programmes have been shown to be effective in small businesses. These programs lend themselves to low cost approaches because they are highly flexible. The writer also proposes that the core elements of the programmes can be implemented at a basic level suitable for small organization, as well as at a more advanced and structured level that may be needed in a larger and more complex organization.

Volkoff, Cristofari, Gadbois, Laville, Molinie and Prunier-Poulmaire (2005)postulate further that it is important to link exposure to health and safety risks to work organization and other features of work and the other worker. This is because the risk does not always lead to a negative health outcome, as protective factor and policies can be in place to mitigate or even

prevent the risk occurring in the first place. Thus, Parent-Thirion el at.(2012)caution that employers have a legal obligation to prevent risk. Following a risk assessment, employers are expected to put in place appropriate risk management strategy and identify appropriate prevention measures to conform to an explicit hierarchy. The writers recommend that this hierarchy should start with risk elimination, risk reduction and end with the provision of training and suitable protective equipment.

Empirical review

The empirical literature addresses research works which have been carried out in parts of the world with regards to the working conditions and health of employees in organization other than the banking sector. Empirical studies have been conducted by researchers to examine the work and health of employees across Europe and Africa but have been limited in terms of the scope of health issues that were covered, category of respondents who were chosen for their studies, methodology, types of the theories and models.

Cottini and Lucifora (2010) for instance investigated the links between contractual arrangements, working conditions and mental health using time-series cross-section data for 15 European countries. These countries were Greece, Sweden, Italy, Finland, Luxemburg, France, Portugal, Belgium, Spain, Denmark, United Kingdom, Germany, Netherlands, Austria and Ireland. The writers used different waves of the Europeans Working Conditions Survey for 1995, 2000 and 2005 to document recent patterns in mental health at the workplace and to assess how these were related to diverse job attributes. They found that substantial heterogeneity in mental health at the workplaces were across workers and between countries (Cottini&Lucifora, 2010).

Cottini and Lucifora further implemented a methodology for differential reporting in ordered response models, which allowed for threshold shifts. Results from their study revealed that a set of workplace attributes such as working in shifts, performing complex and intensive tasks and having restricted job autonomy lead to a higher probability of reporting mental health problems. Evidence werefurther provided of a positive casual effect of adverse overall working condition on mental health distress. Findings also disclosed that labour market institutions, health and safety regulation can explain a significant part of cross-country differences. Though the writers investigate the working conditions of employees across the said European countries, they restricted their research on health to mental discrepancies, which is not solely the focus of this study. Health issues in the current study seeks to encompass all forms of health discomfort that be set workers as eventual repercussions of adverse working conditions.

Jones, Latereille, Sloane, Stavena (2011) used the fourth European Working Conditions Survey(EWCS) to address the impact of age on work related self-reported health outcomes in 31 countries. Twenty – seven of these 31 countries were European Union (EU) member states, while 4 countries included Croatia, Turkey, Switzerland and Norway. Specifically, their research examined whether old workers differed significantly from younger workers regarding their job-related health risk perception, mental and physical health, sickness absence, probability of reporting injury and fatigue. According for healthy worker effect or sample selection, the writer reported that as a group, respondents who were aged 55 and 65 years were more

vulnerable than younger workers to report mental, physical and fatigue health problems, as well as work related absence.

A close look at Cottini and Lucifora(2010) and Jones et al. (2011) research works reveal that they adopted the cross-sectional survey design to structure their studies. Moreover, Jones et al. (2011) research co-opted the age groups of respondents, as one of its study variable in other to examine its relationship with respondents' work and health statues. Though,respondents' age groups are to be reported as part of their demographic characteristics, it is not a major study variable of this research. Using the descriptive survey design, the primordial goal of this is to rather describe the conditions of work and health of employees in the banking sector.

Debrand and Lengagne (2008) focused on the links between the quality of employment and the health of older workers in 11 countries namely: Austria, Belgium, Denmark, France, Germany, Greece, Italy, the Netherlands, Spain, Sweden and Switzerland. The writers based their research on two classical models which were the demand – control and effort –reward imbalance models. These models highlighted three main dimensions namely: demand, control and reward. Demand reflected physical pressure and stress due to a heavy work load. Control referred to the decision latitude at work and the possibilities to develop new skills. Reward corresponded to the feeling of receiving a correct salary relatively to efforts made, of having prospects for personal progress and receiving deserved recognition. These models also took into account the notion of support in difficult situations at work and the feeling of job security.

Debrand and Lengagne (2008) estimated showed further that the health status of older workers was related to the demand, control and reward factors. Fairly low demand level of reward was associated with a good health status for men and women. control only influenced the health status women. The result also revealed the effect on the health of limited supported at work and feeling of job insecurity. Regardless of gender, the absence of support at work and job insecurity was particularly related to the risk of depression. Thus, health status and working conditions were important determinants of the labour force participation of older workers.

Debrand and Lengegne study was biased as only older workers constituted the sample. Young employees were therefore excluded from the sample. All age groups (young and old) of workers though not pertinent to the subject of the current research were including the sample. Aside, an adoption of the demand-control and effort —reward imbalance models from the research work of the stipulated writers to suit the content of the study, motivation theories wereincorporated to establish a synergy between an organization's working conditions and the factors that can motivate its employees to put in their utmost.

Hajjawi (2012) investigate the means employees in Palestine were motivated by their employers to keep firm afloat during a socio-economic crisis that befell the countrybetween 2000 to 2004. Findings from research depicted that workers in Palestinians firms embarked on autonomous motivation that stemmedfrom coherent goals, local cultural values and self – worth performance to overcome business constraints and contingency hindrance. A sample of 32 registered Palestinian Trade Organization was

drawn from a list of 339 organizations. Questionnaires that encompassed a variety of instruments were designed, while the statistical analysis of data.

Owusu (2012) embarked on a research to assess the motivational packages available at the GCB Kumasi zone and how it affected employee performance towards the bank's corporate objectives. The survey research design was used as the methodology structure of the study. Findings disclosed that management could make use of different strategies and policies to motivate employees in the banking environment. Employees were interested in enhanced salaries, fringed benefits, promotion and car loans as motivating elements sufficient to spur them to give out their best.

Owusu's research revealed further that the core duty of the bank was normally carried out by clericals who were more than the supervisors and as such motivational packages were to be geared towards the clerical workers to ensure that they delight the customers. Promotions was a worry to most staff and if management withdrew motivational packages, it would have had serious repercussions on employees' performance. There was a positive relation between employee and corporate performance indicators in terms of deposit, loan recovery, profitability and also ensuring the liquidity of the bank. The conduciveness of the office environment had a first impression on customers and the welfare of employees.

Parent Thirion et al. (2012) conducted fieldwork for fifth EWCS from January to June 2010. Forty –four thousand workers were interviewed in their homes in 27 EU member states, Norway, Croatia, the former Yugoslav Republic of Macedonia, Turkey, Montenegro and Kosovo. The purpose of the study was to measure working conditions across European countries on a

harmonized basis, analyze relationship between different aspects of working conditions and monitor working trends over time. Additionally, the study sought to Identify groups at risk and issues of concern, as well as areas of progress and also to contribute to European policy development particularly on quality of work and employment issues.

Findings from the writer study showed that psychological risks that impacted negatively on workers' health and well-being were high demands and work intensity, emotional demands, insufficient autonomy andethical conflicts. Poor social relationships, job and work insecurity were additional risks. The interview equally revealed that their exposure to psychological risks tended to go hand in hand with their exposure to physical risks and their long hours of work were associated with high level of work intensity. The study further depicted that factors that were associated with a good -work life balance included part-time working, no long working hours, flexi-time and having access to emergency leave at short notice, as well as having regular working hours (Parent Thirion et al.,2012).

Lessons learnt from theoretical and empirical works

The cast review of theoretical and empirical literature suggests that:

Employees can be spurred to give in their best when organizations invest their skills development to enable them to derive intrinsic rewards such as rendering better services to society, feeling satisfied with their work, developing a sense of achievement, recognition, responsibility and personal growth. The need for achieving, affiliation and power are inclusive intrinsic rewards that can motivate workers to render their services.

Apart from the intrinsic rewards, workers are also influenced by extrinsic benefits like a good salary and remuneration, as well as job security to put in their best at work. Equity is also a pertinent factor that can encourage employees to work. In the view of this, employees are to feel fairly or advantageously treated to their work places. Goal setting is an additional factor that can motivate employees to work by ensuring that they establish specific and challenging goals that will contribute to higher and better task performance.

The working conditions of organizations should be such that the protection of employees' health is enhanced, a workplace and risk assessment programme, as well recognition and prevention programme are developed. Creating a conducive work environment for employees' further places responsibility on organization to promote work autonomy, division of labour, good health and to contribute in fostering trust among workers. Ensuring social benefits, participation, job security, support employees, minimizing noise levels, curtailing working hours and workloads are other complimentary conditions of work to be encouraged by organization.

Workers who are subjected to poor working conditions are most likely to encounter psychological, and mental health setbacks. Example of some of these setbacks are stress, depression, insomnia, anxiety, emotional upsets, slurred speech, apathy. Long-term hearing problems, reduce productivity, chronic fatigue, burn-out, stomach ulcer and allergies, cardiovascular and musculoskeletal diseases, immunological problems are additional adverse effects on health. Deplorable conditions of work can also pave the way for workers to experience frostnip, frostbite, hypothermia, anxiety, headache and

loss of alertness. On the contrary, palatable conditions of work curtail injuries, illnesses and fatalities in a working environment.

Conceptual framework

Miles and Huberman (1994) canvass that a conceptual framework explains either graphically or in a narrative form, the main things to be studied; namely the key factors, constructs or variables and the relationship among them. The study framework attempts to show a synergy among the factor that can motivate employees to work with the sector, the nature of working conditions and its effect on the health of employees.

The framework harnesses the issues raised in the lessons learnt to create a linkage among the specific objectives. The issues raised and used to construct the framework are merely assumptions, as the study is yet to be conducted. However, the assumptions shall serve as a guide to the data collection exercise and upon completion of the research, they will either be used to confirm or disapproved the results of the research.

The framework shows that when the bank promotes favorable conditions of work for employees such as ensuring their early closure from work, establishing workplace and risk assessment, as well as recognition and prevention programmes, they will experience a decrease in injuries, illnesses and fatalities at work. Fostering skills development, equity, goal setting, work autonomy division of labour, trust among workers providing social benefits and job security, ensuring participation and support for employees and complimentary suitable working conditions that can also reduce injuries, illnesses and fatalities among workers. (Fig. 1)

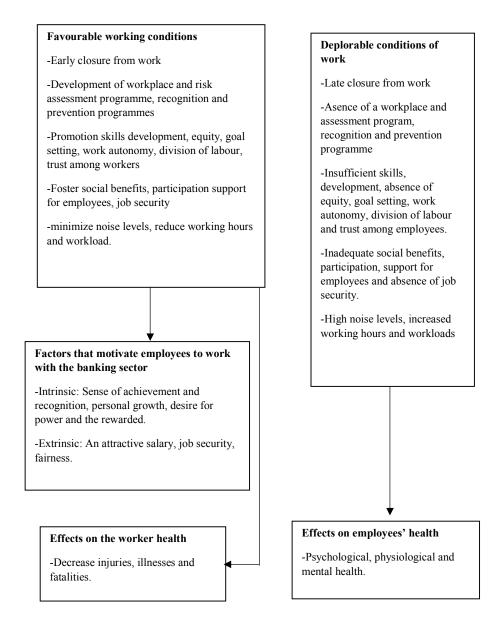


Figure 1: The Effects of Working Conditions on the Health of Employees intheGCB Ltd in Kumasi Zone

Moreover, when employees are well paid, guaranteed and given job security, their morale can be intrinsically boosted to render their utmost services to the banking sector. Additionally, creating an enabling environment for them to attain a sense of achievement and recognition, personal growth and to obtain power are intrinsic elements that can spur workers to invariably

work with the sector. Policies that also foster fairness among and reward hardworking employees can further compliment their extrinsic and intrinsic motivation tendencies to work with the bank. Eventually, when workers are intrinsically and extrinsically motivated, their health shall be positively affected, as they will be psychologically stable to perform their duties. Thus, if they experience any form of injuries, illness and fatalities, by virtue of the fact that they have peace of mind to discharge their operations, their ailments shall decrease.

Conversely, poor conditions of work like inadequate skills development, the absence of core values such as equity, goal setting, work autonomy, division of labour and trust among employees will result in psychological, physiological and mental ill health. Inadequate social benefits, participation, support for employees and the absence of job security, high noise levels, increased working hours and workload are more undesirable conditions of work that can adversely affect workers' health. Again, the absence of workplace and risk assessment, recognition and prevention programmes are supplementary deplorable conditions of work that can also culminate in the ill-health of employees. (Fig. 1)

Workers' health can be affected psychologically through ailments like depression, insomnia, anxiety, emotional upsets, slurred speech and apathy. Physiological consequences are also end products of unpalatable conditions of work. These consequences can manifest itself in staff members in form of hearing impairment, stomach ulcers and deceased productivity. Mentally, members of staff can be affected by contracting diseases like frosstnip,

frostbite, hypothermia and experienced headache, deceased muscles strength and flexibility.

A hybrid of the theoretical and empirical reviews and conceptual framework presupposes that there are intrinsic factors or elements that will motivate bankers to render their services with the banking sector. In tandem with these factors, palatable working conditions all contribute to the health and well-being of the employees. Conversely, unpalatable conditions of work create health discomfort to workers.

CHAPTER THREE

METHODOLOGY

Chapter three examines the methodological components of the study. It covers a description of the structural /functional elements of the organization, a justification of the study design, population, sampling procedure and sample size. The instruments for data collection, fieldwork and methods of data analysis constituted part of the methodological facets of the study.

Structural /functional elements of the bank

This section encapsulates a description of the structure and modality of the GCB Ltd Kumasi zone. This zone is the second largest zone after Accra zone in terms of staffing, the provision of health and social facilities to its workers, it has 22 branches, as well as department such as the valuation, legal, corporate, small and medium scale Enterprise (SME) offices. Kumasi zone is headed by the zonal manager, while the branch and departmental managers are next in command. The operation managers, supervisory class, system administrators and clerical staff operate under the auspices of the branch and departmental managers (GCB Ltd.2007).

The bank provides a wide range of products and services for the benefits of its customers. From the traditional products of the current and saving accounts to specialized products and services including links to the homes of Ghanaian residents abroad, doorstep cash collection, loans and overdrafts. With regard to the bank's working report to work by 7am and start rendering their services to the public at 8.30 am. During working hours, they are expected to go on break for at least one hour (GCB Ltd, 2008).

However, owing to work pressure that emanates from the numerous customers who often crowd the banking hall on a daily basis, workers (most especially the bankers) are left with no option than to work till 4pm, when they are expected to terminate their services to the public. When the bank closes its complete other assigned duties. If they have not finished with their assignments for the day, they are expected to work overtime to complete them, until these earmarked duties are completed, there is no way they will be allowed to go home. This often keeps bankers at work till 8pm(GCB Ltd, 2009).

During working hours, workers switch off their phones in order to create an enabling environment for maximum concentration on their jobs. A worker who is caught making or answering calls during working hours is sanctioned. As a mechanism to enhance the conditions of work for employees at the GCB Ltd Kumasi zone, they have been mandated to become parties of the CBA to pave the Increments after every two years. In case, when workers become disgruntled with their increments they are not permitted under any circumstances to organize a strike or demonstration (GCB Ltd, 2010).

Concerning the bank's health insurance policy, workers are permitted to go for medical check –ups for a maximum of four times and a minimum of two times annually under the sponsorship of the bank. It also pays for the medical bills of its workers, their spouses and children. In cases where a worker is in a critical health state, this payment could also be extended to the footing of bills in hospitals abroad. The bank also owns a clinic, where its workers seeks for medical attention. However, this clinic is based in Accra. Thus, workers who are based in the branches in other parts of the

country and cannot travel all the way to Accra to receive medical attention can go to a public hospital where the bank will pay for their bills .Even after a worker retires from the bank, the organization is liable for his or her medical bills for three years, after which the retiree can take charge of footing his or her own bills (GCB Ltd, 2010).

Study design

The descriptive survey was employed to structure the research. Johnson (2001) and Gay and Airasian(2003) note that a descriptive survey design otherwise known as a normative survey, involves acquiring information about one or more groups of people about their characteristics, opinions, attitudes or previous experiences by asking them questions and tabulating their answers. The writers add that the ultimate goal of this research design is to learn about a large population by surveying a sample of that population. It enables a study to pose a series of questions to willing participant and summarize their responses with percentages, frequencies or more sophisticated statistical indexes and draws inferences about a particular from the responses of the sample.

This design was adopted for the study because information was obtained from a sample of a population of diverse categories of staff members of the bank regarding their opinions on working conditions and health. Information or responses acquired from the respondents were further described and summarized with percentages and frequencies. This made the design appropriate for the research.

Population

The study population was broken down into seven classifications of workers namely: the legal officers, SME officers, corporate staff, evaluation workers, retail managers, supervisors and clerical staff (Table 1).

Table 1: Distribution of target population by designation

Categories	Frequency	Percent
Legal officers	10	8.2
SME workers	10	8.2
Corporate staff	10	8.2
Evaluation officials	10	8.2
Retail managers	20	17.2
Supervisors	30	25.0
Clerical staff	30	25.0
Total	120	100.0

Source: Field data, 2010.

Sample size and sampling procedures

Krejce activities and Morgan's (1970) table for determining sample sizes for research activities was employed to draw up the sample sizes for the various categories of respondents. The writers maintain that for a population of 10, the required sample size is equally 10, while 19 is the prescribed sample for a population of 20 and 28 is the recommended sample for a population of 30. Their suggestions were based on a margin of error of 5% and a confidence level of 95% with the presumption that the actual population of respondents at

the time any study is carried out may be unknown. Thus, going by the stipulated prescriptions, the main sample size was 115(Table 2).

Table 2: Sample sizes of workers in Kumasi zone of GCB

Categories	Frequency	Sample sizes
Legal officers	10	10
SME workers	10	10
Corporate staff	10	10
Evaluation officials	10	10
Retail managers	20	19
Supervisors	30	28
Clerical staff	30	28
Total	120	115

Source: Field data, 2012.

The stratified random sampling method was adopted to stratify the population into seven categories of the GCB's staff members as shown in the Table 1.Stratified sampling is a probability sampling method, which has high degree of reliability, representatives and high generalizability of research results (Fraenkel&Wallen,1990).Going by the prescription of sarantakos(1993), stratified sampling is a special form of simple or systematic random sampling in which the population is divided into a number of strata and a sample is drawn from each stratum. These sub-samples make up the final sample of the study. The division of the population could be based on one or more criteria such as sex, age and economic status.

Sarantakos (1993) adds that a stratified sample is employed when there is a need to represents all groups of the target population in the sample and when the researcher has a special interest in a certain stratum. In this sense, the method is very economical, offer accurate results and a high degree of representativeness and is very useful. In accordance with Sarandakos's propositions, the target population of respondents was categorized into seven to reflect their various job descriptions and a sample size was determined per category (Table 2).

The computer method of the simple random sampling technique was further adopted to single out the 115 respondents. This sampling procedure gives all units of the target population an equal chance of being selected. It was apt for the usage of the study because being a probability sampling method, it employs strict probability rules in the selections process and every unit in the population has an equal, calculable and non-zero probability of being selected for the sample. Thus, adopting this sampling technique guaranteed a high degree of representativeness of research results(Cole&Ormord, 1995).

A list of the earmarked classification of workers was obtained from the Kumasi zone of GCB. This list consisted of the names of the various categories of staff members who were numbered. Using the SPSS version 17, the computer was then instructed to randomly print all the 10 numbers for legal, SME, corporate and evaluation official's. The computer was again instructed to randomly print 19 numbers between 1 and 20; 28 numbers between 1 and 30 for the retail managers, supervisors and clerical staff respectively.

The said numbers were generated through SPSS version 17 by clicking on the Transform. Pull-Down (**TPD**) Menu to select the random Number Generators (**RNG**). In the RNG dialogue box, the select Active Generator Box was ticked and **OK** was clicked. To get some random numbers into the Random Column, the Compute variable (CV) was selected from the TPD Menu. In the CV dialogue box, Random Numbers in the function Group Box was selected (Pallant, 2001).

In the Functions and Special Variables Box, the available random number functions appeared. Rv.Uniform was selected and sent into the Numeric Expressions Box by clicking the Blue Up Arrow.To obtain random numbers between intervals, two question marks were replaced with intervals (1 to 20; 1 to 30). Finally, and Random was entered in to the Target Variable Box. Thereafter, **OK** was clicked to produce the random numbers. The numbers that were chosen by the computer, which corresponded to the numbers on the list of workers, were selected as the respondents of the study (Pallant, 2001).

Instrument design

Questionnaire was employed to elicit primary data. Dowson and McInerney(2001)note that the use of questionnaires enables data to be obtained from respondents with limited interface from research personnel . Thus, participants can respond to questions with the assurance that their responses will be anonymous and so, they can be more truthful than they would be in personal interview, particularly when they are talking about sensitive or controversial issues, Downson and McInerney's admonitions informed the adoption of questionnaire for the study . Moreover, the

respondents were educated enough to comprehend the research questions in the questionnaires .The questions were a combination of close and open ended questions.

Pre-testing of instruments

The pretest was conducted at GCB limited Accra zone. Akin to the Kumasi zone, this zone is equally large in terms of staffing and the availability of health and other social facilities to workers. The Accra zone of GCB also has branches in the cities, semi-rural areas. These are characteristics similar to Kumasi zone. Prior to the pretest, they area and human resource managers were contacted on 7th January, 2012, to contribute to the administrative arrangements of the exercise by permitting easy access to the target workers (legal officers, SME officials, cooperate workers, evaluation staff, retail managers, supervisors and clerical staff) of Accra Zone. On this date, 10th January, 2012 was agreed upon with the managers as the date the workers could receive the questionnaires. The instruments were distributed on this stipulated date to the workers and returned on the 13th January, 2012. After this exercise, the questionnaires were scrutinized and streamlined to correct irregularities.

Data collection exercise

The actual data collection exercised commenced on 17th January, 2012. The selected respondent was reached via the area and human resource managers. The questionnaires were distributed to the respondents and collected on the 25th January, 2012. The major challenge that was encountered was the feet dragging attitude that was demonstrated by most of

the workers in responding to the questions. Most of them were consistently reminded on phone to ensure that they filled the questionnaires, after which they made the attempt to answer the questions.

Methods of data analysis

The collected primary data were imputed, coded, screened and analyzed with the SPSS version 17 software. Data were coded in the variable view and imputed in the data view of the software. The screening was carried out by computing the frequencies and percentages of the minimum and maximum values per variable. Thereafter, the values were inspected to ascertain if they corresponded with the value codes in the variable view. Data were analyzed using frequencies and percentages and presented in the form of tables, pie charts and bar graphs to reflect the specific objectives.

CHAPTER FOUR

RESULTS AND DISCUSSION

Chapter presents the results and discussions of the study to reflect its specific objectives. The chapter is partitioned into three sections to address the factors that spurs respondents to work with the bank, the nature of working conditions and the health problems, which pose as outcomes of the conditions of work employees are subjected to at the bank. The chapter also illustrates a description of staff members' demographic characteristics.

Background information of respondents

The background characteristics of the bank's staff members were described in terms of their sex, age categories, marital status, levels of education, length of service and job description. With regards to the sex, the bulk of staff members were males who constituted 54.8 per cent of the 115 sampled respondents, while 45.2 percent were female respondents.

The age groups of respondents were stratified into four categories as shown in table 3. The results show that 27.8 percent of the respondents were between 20 to 29 years, as compared to only 21.7 percent of the respondents who fell within the range of 30 to 39 years. Quite a reasonable percentage (27%) of the workers was within 50 to 59 years, as opposed to only 23.5 percent who were between 40 to 49 years.

Table 3: Age stratification of respondents

Age group	Frequency	Percent
20-29	32	27.8
30-39	25	21.7
40-49	27	23.5
50-59	31	27.0
Total	115	100

Source: Field data, 2012

With respect to respondents' marital status, findings from the analysis reveal that 53 percent of them were married compared to 47 percent of their counterparts who were single.

Results from the study indicate further that 46 percent of the workers had obtained tertiary education, as opposed to 33.1 percent who had secondary education. Only 20.9 percent of the works acquired other forms of educational levels.

Table 4 illustrates the number of years worker had served the bank. The working years were placed in four categories. Of all the classifications, 1 to 9 years registered the highest percentage (33.9%) of workers who served the bank as compared to the lowest percentage (16.5%) of respondents who had worked with the bank from 10 to 19 years. The rest of the staff members had rendered their services to the bank from 20 to 29 years and 30 to 39 years respectively.

Table 4: Length of service of respondents

Duration	Frequency	Percent	
1-9	39	33.9	
10-19	19	16.5	
20-29	34	29.6	
30-39	23	20.0	
Total	115	100	

Source: Field data, 2012

The analysis depict further that the respondents served in various capacities. Nonetheless, many, (24.3%) of the workers operated as supervisors and clerks. Some of the members of staff functioned as retail managers, evaluation and cooperate official. Relatively, other respondents served as SME and legal officers (Table 5)

Table 5: Job description of workers

Functions	Frequency	Percent
Legal officers	10	8.7
SME workers	10	8.7
Corporate staff	10	8.7
Evaluation officials	10	8.7
Retail managers	19	16.6
Supervisors	28	24.3
Clerical staff	28	24.3
Total	115	100

Source: field data, 2012

Factors that motivate employees to render their service with the banking sector

The motivation of employees examined the intrinsic and extrinsic factors of work. The findings depicted that the intrinsic elements that motivated the employees to dedicate their services with the banking sector were their desire to attain personal growth, a sense of achievement and recognition, power and desire to be rewarded for their efforts. Nonetheless, of all these elements, the quest for personal growth was outstanding, as 56.5 percent of the employees craved for this element more than others (table 6).

Table 6: Intrinsic factors that motivate respondents to work with the banking sector

Factors	Frequency	Percent
Desire for power	8	7.0
Desire to be rewarded	12	10.4
Have a sense of achievement and recognition	30	26.1
Personal growth	65	56.1
Total	115	100.0

Source: Field data, 2012

The respondents who longed for personal growth, implicitly sought to acquire more experience, enhance their skills and build their capacities as their years of service enfolded. This corroborates Furnham's (2005) argument that one of the pertinent conditions of work throughout an individual's working career is skills development. The writer posits that this form of development can spur an employee to continue working with an organization, despite its deplorable conditions of work. Skills development is necessitated by changes

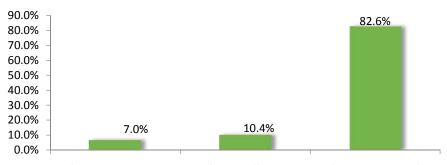
in the content of jobs that require workers to learn new skills. Nonetheless, Cabrita and Perista (2006) contend that training is only one part of lifelong learning, as many workers enhance their skills in the course of discharging their personal and auxiliary duties.

The result also supportsKoltko- Rivera (2006) suggestion of personal growth as an intrinsic motivating work factor. Though stokes (2004) and Koltko-Rivera (2006) have not ranked the factors of work motivation in order of preference, both writers argue that job satisfaction and dissatisfaction depend on intrinsic and extrinsic motivation factors. The intrinsic elements are of higher order than the extrinsic elements and they consist of a sense of achievement, recognition, responsibility and personal growth.

The respondent further disclosed their personal reasons for starting the intrinsic elements that motivated them to work. About 82.6 percent of them argued that apart from earning an income, there was also the need to add value to themselves as they worked over the years and also to be proud of accomplishing challenging task (Fig.2). This type of need is what has been termed by Carraheret al. (2010) as the need for achievement. The writers postulate that this form of need is a situation where an employee who has a high need for achievement tries to attain challenging goals and take personal responsibility as a need for a sense of accomplishment.

Drobnic et al.(2010) also note that for some people, work can give a sense of meaning, when performing tasks that are perceived to be useful for a wider society or when are done well and the objectives set for the work are met. At a more general level, many people spend a significant amount of time at work and the feeling of work-related satisfaction or dissatisfaction can also

contribute to their overall quality of life. the framework (2012) further depicts that conditions of work that encourage personal growth are favorable, intrinsic and therefore spur an employee's to continually render his or her utmost to an organization.



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Source: Field data, 2012.

Figure 2: Reasons stated by respondents for being intrinsically motivated to work with the banking sector

Conversely, 10.4 percent of workers expressed the view that it was just fair for them to be rewarded for the efforts they had invested in their jobs with the bank over the years. This view corroborates Medlock's (2008) proposition in the systematic expectancy theory of workplace motivation that employers are motivated to work towards rewards that they want and believe they have reasonable expectancy of obtaining. Thus, a reward that may seem out of reach, even if it is intrinsically positive will not motivate employees to give in their best. The urge of career advancement was another reason that was stated by 7.0 percent of the workers (Fig.2).

Besides the intrinsic work factors, all the 115 interviewees also revealed that they were extrinsically motivated to work with the bank in order to earn a good salary, acquire job security and be fairly treated. However, the extrinsic driving force that influence 69.6 percent of the employees to render their services to the bank was earn an attractive salary (Fig.3). Stokes (2004) defines extrinsic factors as those factors that create dissatisfaction when employees perceive them as inadequate or inequitable, yet they will not be significantly motivated if these factors are viewed as adequate or good. Such factors include salary, remuneration, job security and working conditions.

As to why the interviewees were extrinsically motivated to work with the banking sector, 82.6 percent of them said they wanted a secured life and future before and after retirement. On the other hand, 17.4 percent of the workers simply wanted a sense of belonging (Fig.4).

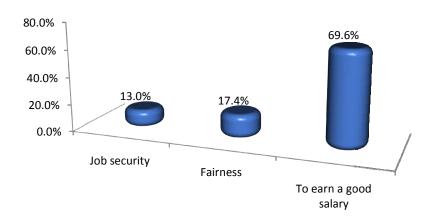
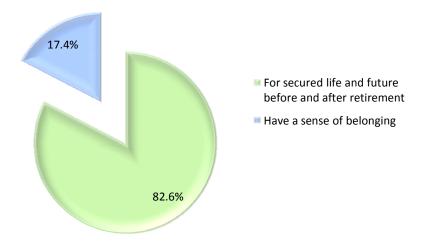


Figure 3: Extrinsic factors of work motivation

Source: Field data, 2012.



Source: Field data, 2012.

Figure 4: Respondents reasons for being extrinsically motivated to render their services to the bank.

Nature of working conditions

The nature of working conditions were investigated in terms of the working hours of the bank, the establishment of a workplace assessment and recognition programs, convenience of facilities offered to workers and the time workers apportion to carry out their social activities. All the 115 respondents disclosed that on the daily basis they began work at 8:30am in and closed at 7:30 pm without overtime benefits. During working hours, they shuffled around computers and files and constantly attended to people of diverse shades and demands. As a result, the working conditions did not favor 56.5 percent of the members of staff in terms of their management of time at home and work (Table 7).

Table 7: Workers' opinions on their working conditions

Functions	YesFr	%	No	%	Total	%
	eq.		Freq.		Freq.	
Legal officers	0	0.0	10	8.7	10	8.7
SME workers	6	5.2	4	3.5	10	8.7
Corporate staff	10	8.7	0	0.0	10	8.7
Evaluation officials	0	0.0	10	8.7	10	8.7
Retail managers	6	5.3	13	11.3	19	16.6
Supervisors	0	0.0	28	24.3	28	24.3
Clerical staff	28	24.3	0	0.0	28	24.3
Total	50	43.5	65	56.5	115	100.0

Source: Field data, 2012.

This group of staff members also admitted that they often got home after 8:00 pm and therefore could not create time to attend to their family affairs and other social activities. Thus, workers experienced an imbalance between their work and family lives. Munoz de Bustillo (2009) cautions that failure to address the conflict between the demands of work and those of family life may culminate in adverse consequences such as stress, burn out syndrome, increased absenteeism and the need to leave employment in order to cater for family responsibilities.

Comparatively, 43.5 percent of the respondents were satisfied with their working conditions, as it was convenient for them in terms of their time management. This group of respondents said they belonged to the lower levels of the bank's ranking. It is by virtue of this fact that they did not have so much work to do after the normal working hours compared to their counterparts who

were high ranking officials. As a result, the low ranking bankers had enough time for themselves.

All the 115 employees disclosed further that no workplace assessment and recognition programs had yet been instituted by the bank. However, management was aware of the demanding and stressful condition of work they underwent on a daily basis. The only form of recognition, which workers said they were accorded were simply compliments and commendations from customers for their hard work and diligence. An absence of the stipulated programs could presuppose that management may not be wholly committed to enhance working conditions in the bank. Hansen, Sverke and Naswall (2009) recommend that the establishment and sustenance of workplace assessment and recognition programs are key in ensuring employees to make a commitment to positive work environments. The frame work that supports this research also considers the institution of workplace assessment and recognition programs in an organization as a condition of work that is favorable.

As mechanisms to ensure work quality in the bank, good health, division of labour, work autonomy and the pace of work were fostered (Fig.5). This notwithstanding, of all these strategies, the pace of work registered the highest percentage (60%) of respondents. This meant more premium was placed on ensuring that workers dutifully perform their roles to meet deadlines. This could account for the stress many of the workers encountered.

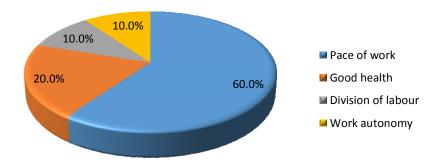


Figure 5: Elements of work quality observed by the bank.

Source: Field data, 2012.

In spite of the taxing condition of work, the findings, however, show that job quality was promoted. Hasselhorn, Muller and Tackenberg (2005) postulate that work quality is on avenue by which job quality can be sustained. Work quality is the material characteristics of the task performed and the environment within which it is performed. It embodies elements such as work autonomy, work organization (including division of work and staffing), organizational culture and trust, good health, the pace of work and social work environment.

Besides work quality, aspects of employment quality were also incorporated as a strategy to promote job quality in the bank. The element of employment quality that was overwhelmingly implemented was training and skill development. This was acknowledged by 73.9 percent of the respondents who had benefited from such a quality of employment. The organization of working hours, the issuing of social benefits and intensive participation by

employees were auxiliary constituents of employment quality that were fostered by the bank (Table 8).

Table 8: aspects of employment quality encouraged by the bank

Elements	Frequency	Percent
Organization of working hours	5	4.4
Social benefits	10	8.7
Intensive participation	15	13.0
Training and skills development	85	73.9
Total	115	100.0

Source: Field data, 2012.

Hassel horn et al. (2005) perceive employment quality as contractual relationship between the employer and the employee, which encompasses aspects like wages, type of contract, working hours (work schedules and family-work balance), social benefits, participation, professional development (training and skill development). Apart from consolidating job quality, sustaining the constituents of employment and work qualities is assumed by the study as measures that elevate working conditions.

Though earlier, the respondents expressed the views that their working environment was not family friendly, 45.2 percent of them who were women, had once been granted maternity leave. Relatively, 52.2 percent were at one time in their working life given leave because of a sick child. Only 2.6 percent of the workers' working hours had been reduced (Fig.6).

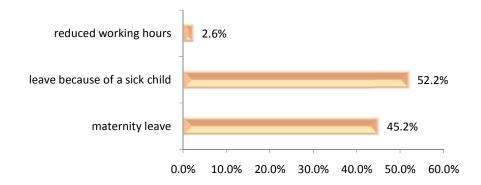


Figure 6: Occasional work benefits granted to employees

Source: Field data, 2012.

The use of air conditioners as part of the working conditions was also palatable workers. This was confirmed by 59.1 percent of them who saw the use of conditioners as comfortable (Fig.7). Relatively, 16.6 percent of the workers considered the use of conditioners as not comfortable. Results from the study revealed further that 16.6 percent of the respondents who saw the use of air conditioners as unconducive complained that they often experienced pneumonia and rheumatism, as an outcome of their continuous exposure to the conditioners. Thus, they opined that they were much more comfortable with the use of standing fans than air conditioners.

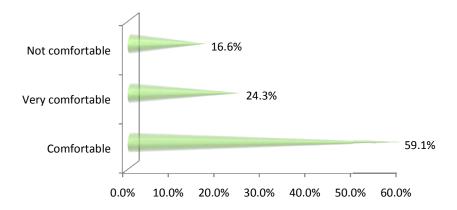


Figure 7: Respondents' perceptions of the use of air conditioners

Source: Field data, 2012.

The health implications (pneumonia and rheumatism) of respondents' incessant exposure to a cold environment does not all tally with SL's (2012) observations that health problems associated with cold exposure in a working environment are frost nip, frostbite, hypothermia, chilblains, immersion foot and trench foot. These ailments are entirely different from what employees experienced as a result of their consistent exposure to air conditioners. The findings do not also confirm WSBC's (2012) assertion that cold temperature can have mental and physical effects on worker's health. The mental changes that ensue from a continuous exposure to cold are loss of alertness, slurred speech, fatigue, lethargy or apathy. The physical responses include a loss of sensitivity, loss of dexterity in fingers, hands and toes and a reduction of muscle strength and flexibility.

Apart from the use of air conditioners, staff members were equally satisfied with the kind of ventilation in their office. This was affirmed by 50.5 percent of staff members who were comfortable with the ventilation situation. Only 29.5 percent were extremely comfortable with the kind of ventilation they were offered (Fig.8). Comparatively, only 20 percent of the workers revealed that they were not the least comfortable.

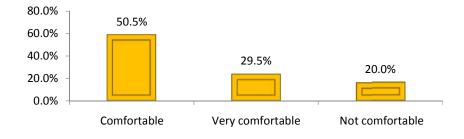


Figure 8: Opinion on ventilation by workers

Source: Field data, 2012.

With regard to the conduciveness of the type of furniture used by respondents, 59.2 percent of them felt comfortable with the kind of furniture that was provided to them by the bank, as opposed to 40.8 percent of their counterparts who were not comfortable with the furniture type in their office. The respondents also had less time to attend to social issues in their life. The concern was expressed by 56.5 percent of the respondents, compared to only 43.5 percent of them who had sufficient time to give attention to their social life (Table 9).

Table 9: Workers' portfolios and time devoted for social responsibilities.

Duties	Yes		No		Total	
	Freq.	%	Freq.	%	Freq.	%
Legal officers	0	0.0	10	8.7	10	8.7
SME workers	6	5.2	4	3.5	10	8.7
Corporate staff	10	8.7	0	0.0	10	8.7
Evaluation officials	0	0.0	10	8.7	10	8.7
Retail members	6	5.3	13	11.3	19	16.6
Supervisors	0	0.0	28	24.3	28	24.3
Clerical staff	28	24.3	0	0.0	28	24.3
Total	50	43.5	65	56.5	115	100.0

Source: Field data, 2012.

The 43.5 percent of workers belonged to the lower rank of the bank and therefore were not fully engaged, relative to their counterparts who were members of the higher rank. The low ranking officials had adequate time by virtue of their limited responsibilities at work and could therefore devote time

for extracurricular activities. This meant there was the likely for these officials to balance up their family affairs and career.

Health problems associated with members of staff working conditions

The third objectives of the study examined the health problems confronted by employees of the GCB Kumasi zone as a result of the working conditions that they were subjected to findings from the study disclosed that the respondents suffered from high blood pressure, diabetes and eye problems. However, the most outstanding health problem that was experienced by many (40%) of the workers was high blood pressure (Table 10).

Table 10: Health woes experienced by respondents

Age	Diabetes		Eye		Blood		Total	
groups			problems		pressure			
	Freq.	%	Freq.	%	Freq.	%	Freq.	%
20-29	4	20.0	811.9		3	10.7	15	13.0
30-39	3	15.0	12	17.9	5	17.9	20	17.4
40-49	5	25.0	30	44.8	10	35.7	45	39.2
50-59	8	40.0	17	25.4	10	35.7	35	30.4
Total	20	100.0	67	100.0	28	100.0	115	100.0

Source: Field data, 2012.

Table 10 depicts that many workers who were between 40 to 49 years (39.2%) and 50 to 59 years (30.4%) were plague with health problems like diabetes, eye problems and blood pressure than their counterparts who fell within the age group of 20 to 29 years (13.0%) and 30 to 39 years (17.4%). Overwhelmingly, more workers (67) experienced eye problems than diabetes (20) and high blood pressure (28). The workers who had eye problems explained that they used the computer more frequently than other working

tools. They were constantly locked on to the computers for many hours, serving long queues without any briefing space. Nevertheless, they disclosed that the bank replaced their reading spectacles for them every other year.

Analysis from the study also revealed that the health problems that were stated by the workers were end products of stress and late eating. About 51.3 percent of the workers maintained that their ill health was a combination of stress and late eating respectively (Table 11). Responds who experienced stress disclosed that the physical work environment was a source of stress to them. Additionally, occupational noise such as the frequent ringing of a telephone and the sound that emanate from the air condition unit was equally a form of stressor to respondents.

Table 11: Causes of health problems to bankers

Causes	Frequency	Percent
Late eating	23	20.0
Stress	33	28.7
Stress and late eating	59	51.3
Total	115	100.0

Source: field data, 2012.

Pressure particularly from the customers, head office and superiors were equally stress factors. The persistent queues and the constant walk in and out of the banking hall and addressing complex issues combined in various ways to create stress for bankers especially during peak periods of the bank. Pressure from the head offices caused the respondents to be rotated over various branches of the bank in Kumasi zone. New job descriptions were also given to them within short notices and pressure was mounted on them to

perform to the optimum and meet strict deadlines. The superiors in the banks further pressurized the respondents by consistently keeping a close watch on them to perform to specific targets, thus creating stressful situations for them often times.

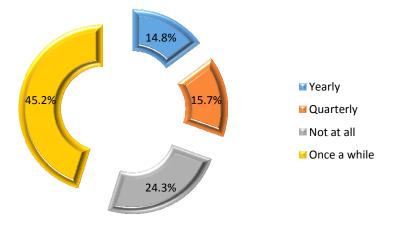
Owing to the nature of work particularly in the banking service sector, the EFIWLC (2007) postulates that workers are exposed to psychosocial risks one of which is stress. Going by the EUOSHA(2009), stress that emanates from work is experienced when the demands of the work environment exceed workers' ability to cope with them as a result, workers can experience symptoms such as chronic fatigue, burn-out, depression, insomnia, anxiety, headaches, emotional upsets, stomach ulcers and allergies. The ILO (2010) notes further that the job characteristics that contribute to ill health are mostly related to the way in which the work is organized. These characteristics are long hours of and irregular high workloads, tight time constraints, insufficient control and job insecurity. The study's framework adds that unfavorable conditions of work also have the tendency to create psychological, physiological and mental ill health in the lives of workers. The respondents who were fond of eating late intimated that by virtue of the nature of their work, they closed late from work, oftentimes after 7.30pm. By the time they arrived home, they were compelled to take dinner late, which later culminated in indigestion, headaches, constipation and clumsiness at workplace .The aftermath of such health inconveniences was long time obesity, an increase in blood pressure and diabetes.

Furthermore, the results showed that alternatively, 47.8 percent of the respondents chose not to eat when they got home late, as opposed to 52.2

percent who because of hunger still braved the odds and ate irrespective of the time. This notwithstanding the respondents who decided not to eat when they arrived home late complained of experiencing stomach ulcer often times. Thus, the results depict that late closure from work was an unpalatable working condition that adversely affected respondents' eating habits. The employees often ate late, which eventually degenerated to stomach ulcer.

About 60.8 percent of the respondents added that some of their health problems such as blood pressure, obesity, diabetes, clumsiness, constipation were end points of their protracted stay in the banking service. This was due to the fact that their constant exposure to computers as well as long sitting hours and the pressure associated with the jobs, combined in a complex manner to culminate in divergent health woes. Comparatively, this was not the case with 39.2 percent of the staff members, as they testified that they hardly fell ill.

Considering the health problems that besotted respondents, once in a while, 45.2 percent of them went for medical checkups. Only 15.7 percent of them sought for medical attention on a quarterly basis, compared to 14.8 percent of their counterparts who went for medical screening annually. Despite, the health woes of respondents, 24.3 percent of them did not bother to see for medical attention (Fig.9).By implication, this percentage of respondents did not give priority to their health, as opposed to their colleagues who at least went for medical screening.



Source: Field data, 2012

Figure 9: Frequency of medical checkups carried out by staff members

Furthermore, 53 percent of the members of staff complained of body break down, as opposed to 22.6 percent whose ineffectiveness at work was characterized by inactiveness. About 24.4 percent of the workers complained of experiencing body breakdown and being inactive (Fig. 10).

The 53 percent of workers who experienced body breakdown explained that they were unable to sustain the body's normal functioning, which curtailed their ability to perform to their optimum. The study framework equally illustrates that workers who put in more hours of work are liable to develop a psychological, physiological and mental ill health, which has the potential of degenerating into inactiveness and ineffectiveness culminating into reduced productivity.



Figure 10.Other health ordeals that affected respondents' efficacy at work

Furtherstill, the workers indicated that they experienced a loss of mental concentration, anxiety, depression, extreme anger and frustration, as well as lower back pain. However, extreme banger and frustration was outstanding, as it was experienced by 34.8 percent of the workers. This percentage of workers confessed that they often came home tired, moody, unwilling to converse with people and therefore was stressed up (Fig.11) TheEUOSUHA(2009) explains that ongoing or intense stress that emanate from work can result in symptoms such as emotional upsets, chronic fatigue, anxiety and burn-out.

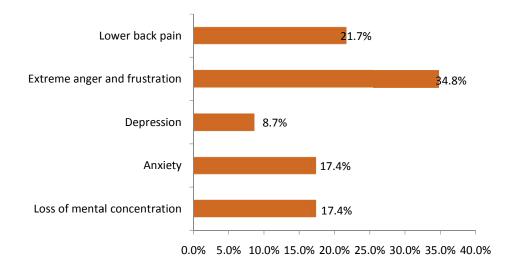


Figure 11: psychological and mental illnesses experienced by staff members

Besides the experienced of psychological and mental ordeals, respondents also complained of being adversely affected by the said ordeals. Forty-eight percent (48%) of them said their morale was low and they experienced headache. Comparatively, 4.3 percent of the respondents talk negatively and had stomach upset. The rest of the respondents had skin outbreaks and memory problems (Table 12). These findings were presumed in the previous chapters at the time the study was yet to be conducted. The presumptions held that mental and psychological breakdown can eventually degenerate into headache, anxiety, loss of alertness, stomach ulcers and allergies.

Table 12:End products of mental and psychological discomfort experiencedby respondents

Time	Frequency	Percent
Stomach upset	5	4.3
Negative thoughts	5	4.3
Skin outbreaks	15	13.0
Memory problems	35	30.4
Low morale and headache	55	48.0
Total	115	100.0

Moreover, the respondents disclosed that the bank installed air conditioners in the office to create a conducive environment for them to discharge their duties effectively. Nonetheless, this was viewed as cumbersome to 16.6 contrary, as it gave them pneumonia and rheumatism. On the contrary, 83.4 percent of the respondents encouraged the use of air conditioners, as a congruous instrument to provide ventilation. Furthermore, findings from the analysis indicated that 40.8 percent of the members of the staff felt that the kinds of furniture they used in the office was not appropriate as often times had backache. Conversely, 59.2 percent of them were comfortable with the furniture type provided by the office because they returned home with little or no side effects.

As a measure to mitigate the health inconveniencies, the respondents revealed that they engaged in physical exercises. Though not regularly, 40 percent of them exercised once a while. However, 20 percent of the workers went out for sporting activities on weekly basis. On the other hand,24.3 percent of their counterparts gave no attention to physical exercises as displayed by Table 13.By implication, most of the bankers did not attach a

lot of premium to physical exercise, which accounted for their numerous ailment. They were negligent of the enormous fall outs they could derive from indulging in regular physical exercise (Table 13)

Duration	Frequency	Percent
Monthly	18	15.7
Weekly	23	20.0
Not at all	28	24.3
Once a while	42	40.0
Total	115	100.0

Source: Field data, 2012.

Findings from the analysis further illustrates that an illness prevention programme was instituted as a strategy to forestall more work related ailments and to allay the employees from subsequent health unpleasantness. This was affirmed by all the 115 employees, who also confirmed that they had benefited enormously from the establishment of such a programme. As to how the respondents were beneficiaries of the programme, 78.3 percent of them had become knowledgeable on how to cope with and manage stress, 7.8 percent regulated their diet and hardly complained of weight problem respectively. Compared to other respondents, only 6.1 percent hardly complained of hypertension (Fig. 12)

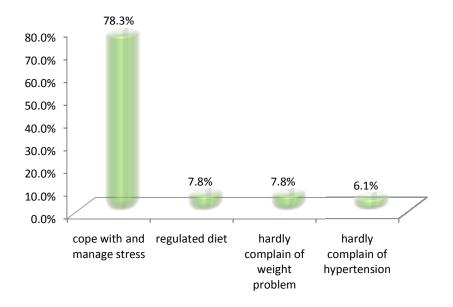


Figure 12: Effects of the illness prevention programme on workers 'health

Thus, the results conform to the suggestions of Liu (2008) of the formulation of an injury and illness prevention programme in organizations, as a measure to rectify the repercussions of poor working conditions on workers' health. The writer admonishes that such a programme is effective in overhauling Work place culture, which can curtail injuries, illness and fatalities. A reduction of works' compensation and other costs as well as an enhancement of their morale and communication are additional positive fallouts of the programme. However, Huang (2009) suggest further that injury and illness prevention programme should comprise of pertinent characteristics such as management's commitment and leadership, effective employee participation, the integration of health and safety. Business planning and continuous programme evaluation are complimentary elements of the effectiveness of the stipulated programmes. The writers caution that without

incorporating these components, an injury and illness prevention programme shall be least effective.

Generally, the finding intimate that personal growth (56.5%) and the desire to be remunerated appropriately (69.6%) were the major intrinsic and extrinsic factors respectively that spurred workers to render their outmost services to the bank. In terms of the nature of working conditions, all the 115 respondents intimated that on a daily basis, they went to work as early as 8:30 am and close excessively late at about 7:30pm. They also revealed that the bank did not possess a policy for workplace assessment and recognition programs, which negatively affected their morale at work.

Additionally, 56.5 percent of the respondents could not dedicate their time to carry out their personal social activities, owing to the overwhelming demands driven by nature of the job. This notwithstanding, the bank at least created a conducive environment for its employees to discharged their functions by providing air conditions as it was disclosed by 59.1 percent of the respondents who saw the use of this instrument to be very conducive for their operations. About 50.5 percent of the employees equally intimated that the bank's ventilation apparatus was satisfactory, while 59.2 percent of the them commended the bank for the types of furniture it provided to workers. With respect to workers' health, the results showed it was ubiquitous for many of the bankers to encounter health woes such as high blood pressure (40%), eye problems (58.3%), extreme anger and frustration (34.8%), low morale and headache.

CHAPTER FIVE

SUMMARY, CONCLUSION AND RECOMMENDATIONS

This chapter presents a summary of the study's findings, conclusions and recommendations. Generally, the study investigated the effects of the working conditions on the staff of GCB Limited-Kumasi zone.

Summary

This section addresses the major findings percent the specific objectives. Concerning the factors that motivate the bank's members of the staff to render their services to the institution, the primordial finding revealed that:

- I. The quest for personal growth and a good remuneration package encouraged most staff members to work with the bank.
- II. As to why personal growth and adequate remuneration spurred the members of staff to serve the banking sector, the majority of them stated that they wanted to add value to themselves, learn to accomplish challenging tasks and secure a better life and future before and after their retirement age.

In terms of the bank's nature of working conditions, the salient results showed that:

- I. The working conditions were not satisfactory to most of the bankers as they always worked overtime and got home late without any extra benefits.
- II. Many of the interviewed members of the staff found it difficult to balance up their work, family and social obligations, as a result of their prolonged hours of work.

- III. No workplace assessment and recognition programs had ever been created by the bank to appraise the working conditions and reward the efforts of workers.
- IV. The bank was very much interested in the pace of work of its workers, as the most important mechanism of ensuring their quality of work.
- V. More priority was given to the skill development and training of staff members as a pertinent measure to uplift the quality of employment in the bank.
- VI.Many of the members of staff were once privileged to enjoy leave because their children fell ill.
- VII. The majority of workers saw the use of air conditioners to be conducive for their working environment.
- VIII. Most of the members of the staff were comfortable with the ventilation that they received in their office.
 - IX. The kind of furniture that was offered to staff members to discharged their routine duties was considered comfortable by many of them.
 - X. Owing to work pressure, more of the workers hardly socialized, as they could not apportion time for extracurricular activities.

With regard to the ailments that besotted the lives of respondent, as outcome of their conditions of work the major analyses depicted that:

I. More workers suffered from high blood pressure than other ailment like eye problems and diabetes.

- II. Pressure emanating from customers, the head office and the bank's superior contributed to stress in the lives of most bankers that eventually lead to their psychological displeasures.
- III. By virtue of the fact that many of the respondents ate late, they experienced indigestion, headaches, constipation and clumsiness, which later on translated into obesity, high blood pressure and diabetes.
- IV. Even though the majority of respondents were conscious of their health discomfort they scarcely went for medical checkups, as most of them went for health screening only once a while.
- V. There was a general breakdown in the normal functioning of the body of more workers as they tackled numerous tasks on a daily basis, while discharging their routine functions. This affected their efficacy at work.
- VI. The prominent symptom of psychological and mental ill health that was encountered by many respondents was extreme anger and frustration.
- VII. Low morale and headache were the outstanding outcomes of mental and psychological ill health that were witnessed by most respondents.
- VIII. Most workers gave little or no priority to indulging in physical exercises as a measure to manage their health ordeals.
- IX. Mitigating the effects of stress on the health of majority of the employees, through the adoption of copies and management strategies was the most important programme by the bank.

Conclusion

Base on the findings of the study, the following conclusions are drawn:

Personal growth and the desire to earn an attractive remuneration package

were factors that motivated workers to work with the banking sector. Personal

growth enabled employees to enhance their knowledge base and achieve

challenging tasks, while an appropriate remuneration package guaranteed a

secured life and future for them before and after their retirement from work.

The working conditions that workers were subjected were favorable in terms of the social amenities that were offered to them in the office. These amenities were the types of furniture and ventilation practices that workers received. The bank also ensured that its employees finished theyear marked tasks in time and on time, underwent regular skills development and training and secured leave for ailing children. This notwithstanding, the most challenging aspect of their working conditions was their late closure from work, which was mandatory, owing to the myriad assignments they had to tackle on a daily basis.

This did not permit them to allocate time to cater for their family and social lives.

Furthermore, priority was not given to the creation of workplace assessment and recognition programmes. Thus, the conditions of work place were not assessed and employees' effort were not officially rewarded.

The common health problems workers witnessed by virtue of the nature of their working conditions were high blood pressure, indigestion, headaches, constipation and clumsiness. Extreme anger and frustration, low morale and headaches, pneumonia and rheumatism, as well as backache were

supplementary experiences of workers psychological, physiological and mental ill health.

Recommendation

Base on the summary and conclusions of the study, the various categories of the bank's staff members are entreated to:

- Accentuate the organization of more regular skills development or training programs by the bank and sustenance of the bank's good remuneration package to retain competent staff members in the bank.
- II. Concertedly press and appeal for early closure from work. This will enable them to get home in time, eat on time, rest adequately and give them time to prepare for the next working day. By so doing, this shall curtail the likelihood of the contracting and being prone to ailments like high blood pressure, diabetes, obesity, indigestion. Early closure from work will also enable the workers to create time to attend to their family responsibilities and social life. However, closing from work early will also mean that banking services to customers will have to be terminated during the early part of the day like 2:30pm to give room for bankers to close and balance their account for the day before officially closing from work.
- III. Solicit for the formation of workplace assessment and recognition programmes. The creation of an assessment programmes shall pave the leeway for working conditions to be examined and assessed regularly probably on a quarterly or yearly basis. This will give room to continue with and enhance the good elements of the bank's working

conditions, as well as unearth and fill the lacunas of these conditions.

The recognition programme on the other hand shall officially recognize and reward the efforts of diligent and hardworking workers to inspire other workers to emulate the examples of their colleagues.

- IV. Insist on the institution of the principle of division of labour and appropriate supervision of tasks. This will foster the earn making and supervision of different kinds of tasks to all levels or categories of workers and relieve some workers from the headache of being saddle with lots of responsibilities. This will also give them time to concentrate on their assigned duties and complete them in time.
- V. Request for the recruitment of younger banking personnel to relieve the older personnel from some of the duties that could pose a threat to their health. The older personnel are equally cautioned to retire from the banking service when their time is due. This will pre-empt undue pressure on their health and enable them to live longer.
- VI. Regularly going for medical checkups for the early detection of the signs and symptoms of high blood pressure, obesity, diabetes and treat and cure them before their health condition exacerbates.
- VII. Regularly indulge in physical exercise like engaging in sporting activities, going for a walk in the evening, going on foot to walk able destinations instead of using the car. These forms of physical activities shall mitigate stress in their lives and forestall heart diseases like high blood pressure and obesity.
- VIII. Create time to attend social activities particularly over the weekends, when they may be less busy. Meeting and socializing with people

presents an opportunity to engage in conversations, recreational activities and share personal problems, which are all avenues for releasing stress.

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APPENDIX

QUESTIONNAIRE FOR RESPONDENTS

Dear respondent,

I am a Masters student at the Institute for Development Studies in the

University of Cape Coast. In the partial fulfillment for an award of a Masters

of Arts Degree in Human Resource Management, I am undertaking this study

to ascertain the working conditions and health of staff members with the

GCB- Kumasi zone. Your responses shall be used solely for the stipulated

purpose. You are therefore urged to be candid as possible in expressing your

opinions on every issue that will be raised. Tick one answer in the boxes

provided.

THANK YOU.

SECTION A: Personal data

1. Sex: I) Male [] II) Female[]

2. Age:

I) 20-29[]

II) 30-39[]

III) 40-49[]

IV) 50-59 []

3.Level of education:

I) Secondary[]

II) Tertiary[]

III) Others(specify)

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4. Length of service:
I) 1-9[]
II) 10-19[]
III) 20-29[]
IV) 30-39[]
5.Job status of respondent:
I) Legal officer[]
II) Small and medium Scale Enterprise official[]
III) Corporate official[]
IV) Evaluation officer[]
v) Retail manager[]
VI) Supervisor[]
VII) Clerical officer[]
6.Marital status:
I) Single[]
II) Married[]
SECTION B: Factors that motivate workers to render their services with the
banking sector
7. What are the inward looking factors that are motivating you to work with
the bank
I) Desire for power[]
II) Desire to be rewarded[]

III) Have a sense of achievement and recognition[]
IV) Personal growth[]
V) Others (specify)[]
8. Provide reasons for your answer
9. What are the external factors that are motivating you to work with the
bank?
I) Good salary[]
II) Acquire job security[]
III) To be fairly treated[]
IV) Others(specify)
10. Give reasons for your chosen answer
SECTION C: Nature of working conditions
11. At what time do you commence work?
12. At what time do you close from work?
13. What activities do you engage in during work hours?
14. Are you satisfied with your working conditions? I) Yes[] II) No[]
15. Give reasons for your chosen answer
16. Which rank do you belong to in the banking staff?
I) Higher rank[]
II) Lower rank[]

17. Does a workplace assessment programme exist in your organisation?
I) Yes[] II)NO[]
18. If yes, how has it ameliorated your working conditions?
19. Has a recognition programme been instituted in your organisation?
I) Yes[] II) No[]
20. If yes, how has it motivated workers to discharge their duties?
21. Which aspects of work quality does your organisation observe?
I) Division of labour[]
II) Work autonomy[]
III) Safety and health[]
IV) Pace of work[]
22. Which aspects of employment quality does your organization promote?
I) Organization of working hours[]
II) Social benefits[]
III) Intensive participation of employees[]
IV) Training and skills development[]
23. Tick one of the benefits that has once been granted to you by the
organization.
I) Maternity leave[]
II) Company leave because of a sick child[]
III) Reduced working hours[]
IV) Offer of child care facilities[]

24. What is motivating you to stay on in the banking service?
I) Good salary and remuneration[]
II) Job security[]
III) Desire for personal growth[]
IV) Attain a sense of achievement and recognition[]
V) Workers are fairly treated[]
VI) Goal setting and attainment is encouraged[]
25. How comfortable are you with the use of air conditioners?
I) Very comfortable[]
II) Comfortable[]
III) Not comfortable[]
26. Provide reasons for your not being comfortable with the use of air
conditioners
27. How comfortable are you with your office ventilation?
I) Very comfortable[]
<pre>II) Comfortable[]</pre>
III) Not comfortable []
28. How comfortable are you with the furniture type in your office?
I) Comfortable []
II) Not comfortable []
III) Very comfortable []
29. Do your working conditions affect your social life?
I) Yes []
II) No []

SECTION C: Common health problems experienced by workers

30. Which of the following health problems normally affect you by virtue of		
your working conditions?		
I) Diabetes []		
II) Blood pressure []		
III) Eye problem []		
IV) All of the above []		
31. Which of the following di you think Is the cause of your health problem?		
I) Stress []		
II) Late eating []		
III) All of the above []		
32. If you experience stress, which of the factors was a source of stress to		
you?		
I) The working environment []		
II) Frequent ringing of the phone and air condition unit []		
III) Constant mobility to address customers []		
IV) Pressure from customers, head office and supervisors []		
33. Do you eat late? I) Yes [] II) No []		
34. Give reasons for your answer		
35. How does late eating affect your health?		
36. If you choose not to eat late, what happens to your health?		

37. What do you think may be other causes of your health problems?
38. How often do you go for medical checkups?
I) Quarterly []
II) Yearly []
III) Once a while []
IV) Not at all []
39. What other health problems do you encounter?
I) General body breakdown []
II) Others (Specify)
40. How does your selected health problem manifest itself?
41. What symptoms of physiological and mental ill health have you ever experienced?
I) Loss of mental concentration []
II) Anxiety []
III) Depression []
IV) Extreme anger and frustration []
V) Lower back pain []
42. How does any of these symptoms manifest itself in your body?
43. What normally are the outcomes when you undergo stress?
I) Low morale and headache []
II) Negative thoughts []
III) Stomach upset []

IV) Skin outbreaks []
V) Memory loss []
44. What is your opinion on the use of air conditioners in the office?
45. What is your opinion on the use of the furniture in the office?
46. How often do you exercise?
I) Weekly []
II) Monthly []
III) Once in a while []
IV) Not at all []
47. Has an illness prevention program been created in your organization?
I) Yes []
48. If yes, how has it affected your health?